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UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF FLORIDA Panama City DIVISION

CIVIL RIGHTS COMPLAINT FORM TO BE USED BY PRISONERS IN ACTIONS UNDER 42 U.S.C. § 1983

RAMON ARMAS BURRUTO JR.	,	
Inmate # X27467 (Enter full name of Plaintiff)		
		•
vs.		CASE NO: 5.04cv165/RH/WCS (To be assigned by Clerk)
Office & T. Mc Donald		
Officer Pale		
officer spate		
Sergeont McKenzie		
Enter name and title of each Defendar	nt.	
If additional space is required, use the		
plank area below and directly to the rig	ht.)	

ANSWER ALL QUESTIONS ON THE FOLLOWING PAGES:

OFFICE OF CLERK
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NOT THE PAGE ALL.
HISTERIOT OF,
H

04 361. 19 811.1141

(4)

Sergeant Washington C. F. 4455 Sam Mitchell DR

Chipley FL32428

I. PLAINTIFF:

State your full name, inmate number (if applicable), and full mailing address in the lines below.

Name of Plaintiff:

Ramon Armas Borecto JR

Inmate Number

X 27467

Prison or Jail:

Florida State Prison C-1304

Mailing address:

7819 N.W. 228th St. Raiford, FL 32026

II. DEFENDANT(S):

State the <u>name</u> of the Defendant in the first line, official position in the second line, place of employment in the third line, and mailing address. Do the same for <u>every</u> Defendant:

(1) Defendant's name:

T. McDonald

Official position: Employed at:

Washington CI.

Mailing address:

4455 San Mitchell D.R

Chipley, FL 32428

Defendant's name:

Official position:

Employed at:

(2)

Washington C. I

Mailing address:

4455 Sam Mitchell DR

Chipley, FL 32428

(3) Defendant's name:

Spate ___

Official position: Employed at:

Washington C. I.

Mailing address:

4455 Sam Mitchell DR

Chipley, FL 32428

ATTACH ADDITIONAL PAGES HERE TO NAME ADDITIONAL DEFENDANTS

b.

NOTE: THE COURT WILL NOT REVIEW THE MERITS OF THE COMPLAINT UNLESS THE FOLLOWING QUESTIONS HAVE BEEN ANSWERED REGARDING EXHAUSTION OF ADMINISTRATIVE REMEDIES AND ANY PRIOR LAWSUITS THAT HAVE BEEN FILED.

III. EXHAUSTION OF ADMINISTRATIVE REMEDIES

Exhaustion of administrative remedies is required prior to pursuing a civil rights action regarding conditions or events in any prison, jail, or detention center. 42 U.S.C. § 1997e(a). Plaintiff must submit copies of all grievances, appeals, and responses with this complaint to verify exhaustion. Failure to demonstrate exhaustion may be grounds for dismissal.

Α.	DOE DEP	ES YOUR COMPLAINT CO PARTMENT OF CORRECT	ONCERN EVENTS OCCURRING WITHIN THE FLORIDA
		Yes(🟏)	No()
	[If yo	our answer is NO, proceed se following questions in thi	to Question B. If your answer is YES, answer all is subsection.]
	1.	Informal Grievance	
	a.	Did you submit an infor	mal grievance?
		Yes()	No(>>)
		❖ If so, you must attach	n a copy of the grievance and response; exhibit <u>Ŋ/</u> Ą:
	b.	If not, why? I filed	An Empgency Grievance directly to Tallahassee
	2.	Formal Grievance	
	a.	Did you submit a formal	grievance?
		Yes()	No(×)
		❖ If so, you must attach	a copy of the grievance and response; exhibit NA.
	b.	If not, why? Energenc	y GRIEVance directly to TAllAhasce
	3.	Appeal to the Office of	•
	a.	Did you submit an appea	al to the Office of the Secretary?
		Yes (≯)	No()
		❖ If so, you must attach	a copy of the appeal and response; exhibit A .

	4.	Disciplinary Actions .
	a.	Did you have a disciplinary hearing concerning this matter?
		Yes() No(⋌)
		♣ If so, you must attach a copy of the disciplinary report and disciplinary hearing team's findings and decision to this form; exhibit <a dx.new.new.new.new.new.new.new.new.new.new<="" href="https://www.nc.nib.nib.nib.nib.nib.nib.nib.nib.nib.nib</th></tr><tr><th></th><th>b.</th><th>Did you lose gaintime as a result of the disciplinary hearing?</th></tr><tr><th></th><th></th><th>Yes() No(⋉)</th></tr><tr><th></th><th>C.</th><th>Has the gaintime since been restored?</th></tr><tr><th></th><th></th><th>Yes() No(≯)</th></tr><tr><th>В.</th><th>DOE
JAIL</th><th>S YOUR COMPLAINT CONCERN EVENTS OCCURRING WITHIN A COUNTY OR DETENTION CENTER?</th></tr><tr><th></th><th></th><th>Yes() No(⋉)</th></tr><tr><th></th><th>[If yo
If you</th><th>ur answer is NO, proceed to Section IV of the complaint form.
Ir answer is YES, answer the following questions.]</th></tr><tr><th></th><th>1.</th><th>ls there a grievance procedure at your institution or jail?</th></tr><tr><th></th><th></th><th>Yes() <math>N/A</math> No()</th></tr><tr><th></th><th>[If you</th><th>ur answer is NO, proceed to Section IV of the complaint form. If your er is YES, answer all of the following questions in this subsection.]</th></tr><tr><th></th><th>2.</th><th>Did you submit a grievance concerning the facts relating to your complaint?</th></tr><tr><th></th><th></th><th>Yes() N/A No()</th></tr><tr><th></th><th>3.</th><th>If your answer is YES: N/A</th></tr><tr><th></th><td></td><td>a. What steps did you take?</td></tr><tr><th></th><th></th><th>b. What were the results? N/A</th></tr><tr><th></th><th></th><th>❖ If so, you must attach a copy of the grievance and response; exhibit
	4.	If your answer is NO, explain why not:

NOTE: FAILURE TO DISCLOSE ALL PRIOR CIVIL CASES MAY RESULT IN THE DISMISSAL OF THIS CASE. IF YOU ARE UNSURE OF ANY PRIOR CASES YOU HAVE FILED, THAT FACT MUST BE DISCLOSED AS WELL.

IV. **PREVIOUS LAWSUITS**

	Have you initiated other actions in state court dealing with the same or simila facts/issues involved in this action?	r
	Yes() No(.★)	
	a. Plaintiff(s): NA	
	b. Defendant(s):	
	2. County and judicial circuit: N/A	
	Name of judge:	
	. Approximate filing date://A	
	. If not still pending, date of dismissal:	
	. Reason for dismissal:///	
	(Attach additional pages as necessary to list state court cases.)	
	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similacts/issues involved in this action?	
	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similar	
	. Facts and claims of case://ft (Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similacts/issues involved in this action? es() No(X) Parties to previous action: a. Plaintiff(s):/ft	
	. Facts and claims of case://f (Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or simil acts/issues involved in this action? es() No(×) Parties to previous action: a. Plaintiff(s):/f b. Defendant(s)://f	
	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similarts/issues involved in this action? es() No(×) Parties to previous action: a. Plaintiff(s):	
	. Facts and claims of case://ft (Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similacts/issues involved in this action? es() No(X) Parties to previous action: a. Plaintiff(s):/ft	
	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similarts/issues involved in this action? es() No(×) Parties to previous action: a. Plaintiff(s):	
	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similarts/issues involved in this action? es() No(×) Parties to previous action: a. Plaintiff(s):	
2 3 2 5	(Attach additional pages as necessary to list state court cases.) ave you initiated other actions in federal court dealing with the same or similarits/issues involved in this action? es() No(X) Parties to previous action: a. Plaintiff(s):/A b. Defendant(s):/A District and judicial division:/A Name of judge:/A Approximate filing date://A	

C.	incarceration (including loon finement (including life, whether it be generated)	actions (besides those listed above in Questions (A) and ederal court that relate to the fact or manner of your habeas corpus petitions) or the conditions of your civil rights complaints about any aspect of prison eral circumstances or a particular episode, and cessive force or some other wrong)?
	Yes()	No(X)
If YE desc belo	tine all additional cases on	the space provided below. If more than one action, a separate piece of paper, using the same format as
	Parties to previous ac a. Plaintiff(s):	tion:
	D. Defendant(s);	NIH
	2. District and judicial div	vision: N/A
	3. Name of judge:	N/A
	4. Approximate filing dat	e:
	5. If not still pending, dat	e of dismissal:///
	6. Reason for dismissal:	~/A
	7. Facts and claims of ca	ase: N/A
D.	Have you ever had any a	ges as necessary to list cases.) ctions in federal court dismissed as frivolous, a claim, or prior to service? If so, identify each and
	Yes()	No(★)
	Parties to previous act a. Plaintiff(s):	ion:
	b. Defendant(s):	NA
	2. District and judicial divi	sion: N/A
	3. Name of judge:	N/A Case Docket # N/A

(Attach additional pages as necessary to list cases.)

Dismissal date: ____

4. Approximate filing date: ___

5. Reason for dismissal: _____NA

V. STATEMENT OF FACTS:

Using numbered paragraphs, state as briefly as possible the FACTS of your case. Describe how <u>each</u> defendant was involved and what each did or did not do to give rise to your claim. Include the names of persons involved, dates, times, and places. State exactly what happened. DO NOT make any legal arguments or cite any cases or statutes. You may make copies of these pages and attach additional sheets of paper if needed:

(BB On 11/18/02 at Approximately 8:30 AM. I was placed in handcuffs and taken out cell G4-101 were I resided on CM status I was taken out by Officer Mc Donald & Officer Pate. I was taken to the Room where they have D.R. court 3 as the Officers refer toit, "the Room with NO cameras Inside this Room were also Officer Spate, Nurse Kent, and Seegennt McKenzie Off. Pate stood in front of the window so No one could witness the incident other than those inside the room. I stood handcuffed with my hands behind my back close to the wall Off Mc Donald then procoeded to punch me with his left fist in my abdominal AREA. He punched me about 6 or 7 times there. Then he pushed my head down and punched me with his right hand in the back of my head about 3 or 4 times, and hit me once on my left ear. Last he placed my head between his legs and grabbed me around my waist and picked be off the ground 3 dropped me on my head sugge kent then said," stop stop," 3 Sqt. Mckenzie said, "Ok. that's enough". Sgt. Mckenzie grabbed my eight arms and lifted me back to my feet. I was then taken back to my cell where the handcuffs were removed. My ear turned black from one of off. Mc Donalds punches David Blake Brooks & Ronald CAIN 736165 ARe just 2 of the inmate who can venify my ear

V. STATEMENT OF FACTS:

State briefly the FACTS of this case. Describe how <u>each</u> Defendant was involved and what each person did or did not do which gives rise to your claim. In describing what happened, state the names of persons involved, dates, and places. <u>Do not make any legal arguments or cite to any cases or statutes.</u> You must set forth separate factual allegations in separately numbered paragraphs. You may make copies of this page if necessary to supply all the facts. Barring extraordinary circumstances, no more than five (5) additional pages should be attached. (If there are facts which are not related to this same basic incident or issue, they must be addressed in a separate civil rights complaint.)

being black. At approximately 6:30 P.M. on 11/28/02 T trund to declare a staff Assualt which was denied by sergeant English. His Reason being"the captain Already left for the night". I declared a staff assualt at 11: Pm 3 was finally given the opportunity make a statement 3 be seen by the nurse. A moderage state (50h sed to take pictures of my ear. I filled out an affidavitt before a white male, white haired, John Doe Captain. I also wrote an Energency Greenance on this incident which was suppose to go directly to Tallahassee. On 12/2/03 I was threatened by sqt. Mckenzie, Off. Spate, 3 Lt Copeland to & Leepquiet about it be moved from the doen because of the Pene I was in While cell a white make overweight John Doc Captain came to see me Showith grievance which was suppose to the secretary in his hand the was accompanied by a white fourde Jane Doe Nuese. She verified that my bruisedear was caused by A punch. I never peceive a peponse to my grievance only the Inspector KRAUS from the I. G.'s office unmidentely transferred me to SANTA Rosa C. I. after interviewing me. I wrote a second grievance It in January which was also never answered. All the spanish po Roximately Genera advised me investigation & (RB ROOM in the times to obtain my medical records, to No medical release formso you may record concerning this abuse

VI. STATEMENT OF CLAIMS:

State what rights under the Constitution, laws, or treaties of the United States you claim have been violated. Be specific. Number each separate claim and relate it to the facts alleged in Section V. If claims are not related to the same basic incident or issue, they must be addressed in a separate civil rights complaint.

DOFC McDonald violated my 8th Amendment "Freedom from Cruel and Unusual Punishment" also My 4th Amendment "Freedom from Assmit." He violated these Constitutional Rights by committing the act of "Assmult and Battery" against my person and punishing me in a cruel and unusual mannor (DOFC. Pate, OFC. Spate, and Sqt. Mckenzic violated my 8th Amendment as well due to their deliberate indiffence to their duty to protect my person from ouch assaults and punishments.

VII. RELIEF REQUESTED:

State briefly what relief you seek from the Court. Do not make legal arguments or cite to cases/ statutes.

(B) I seek compensatory damages : punitive damages : that Officer ye Donald be fixed : the rest be reprimanded. I'm suring all the defendants both in their individual capacities : official accapacities. Also I seek any others relief to which I'm entitled to in this action which the Court dashies along the court of the court dashies along the court of the court dashies along the court of t

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING STATEMENTS OF FACT, INCLUDING ALL CONTINUATION PAGES, ARE TRUE AND CORRECT.

(Date)

(Date)

(Signature of Plaintiff)

IF MAILED BY PRISONER:

(Signature of Plaintiff)

Revised 07/02

LEGAL MAIL PROVIDED TO FLORIDA STATE PRISON DATE INITIALS 전공 AMMATES INITIALS

Filed 07/19/2004 Document 1 RETURN TO BORROTO RAMONOSU SHIAL NUMBER WASHINGTON C.I. X27467 INSTITUTION I ACKNOWLEDGE FECEIPT THIS DATE OF A GRIEVANCE FROM THE ABOVE IMMATE IN REGARD TO THE FOLLOWING SUBJECT 5DISCIPLINE DATE 12/3/02 02-12025NCE LOG NUMBER RECIPIENT'S S NATION STAFF MEMBER) DISTRIBUTION: CENTRAL OFFICE

WHITE COPY CANARY COPY PINK COPY

GOLDENROD COPY

INSTITUTION/FACILITY INMATE COPY INMATE'S FILE INMATE COPY

RETAINED BY OFFICIAL RESPONDING

DISTRIBUTION:

WHITE COPY CANARY COPY PINK COPY GOLDENROD COPY

INMATE'S FILE - INST/FACILITY C.O. INMATE FILE

INMATE COPY

RETAINED BY OFFICIAL RESPONDING

DC1-303 (Revised 8-00) FXHIBIT A

BXIXIS

Document 1

Filed 07/19/2004

Page 11 of 11

INMATE REQUEST

STATE OF FLORIDA DEPARTMENT OF CORRECTIONS

Mail Number: Team Number: (Instructions on Back) Institution:

	(Chook Ome)		edical ental	Other	
	Inmate Name	DC Number		MR. CASHE	
	FROM:		Quarters	Job Assignment	Date
_	Ramon Borroto	X21467	G-1219-L		9/19/03
	REQUEST				
(1)	C.I on date 12/3/02 it was file	grievance log	Number C	2-12025 At W	Jashinston
	C.I on date 12/3/02 it was file	ed signed by	L-Lykins	. I have the	Receipt.
(2)					
	THISC NEED USE TO CHECK THE COMO	uter here on	the follo	wing GRIEVA	nces to
	THE BOTTLE POLICE OF THE PRINTING PO	こめじ いいもれて くせんも	LASSILITA	which and as	
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	THE PROPERTY OF THE MAS A	4RO3-00146	dated 9-2	MENERS LINE	11 1
(3)	I HIEG AN EMERGENCY GRI	EVANCE ON A 5	hall Assuce	14 b. LT IL	1. T
	THE THINK THE IT SAUS	ことのらた たんおり ペニ	nstand a	1 South Paris	Thout
i			1117676	1 341110 10034	
	you tou your help. I weate it a	round Jani	10011		1 1/4/1/C
	you soil your nelp. I whore it A	found JANI	ARY.		
	All requests will be handled in one of the follow	ing ware Dani	ARY.		
	All requests will be handled in one of the followinformal grievances will be responded to in write	ing ware Dani	ARY.		
	All requests will be handled in one of the follow informal grievances will be responded to in writ	ving ways: 1) Written Inting.	nformation or		
	All requests will be handled in one of the follow informal grievances will be responded to in writ	ing ware Dani	nformation or		
	All requests will be handled in one of the follow informal grievances will be responded to in writ	ving ways: 1) Written Inting. WRITE BELOW THIS	nformation or LINE	2) Personal Interview	
	All requests will be handled in one of the follow informal grievances will be responded to in write	ving ways: 1) Written Inting. WRITE BELOW THIS	nformation or	2) Personal Interview	
	All requests will be handled in one of the follow informal grievances will be responded to in write	ving ways: 1) Written Inting. WRITE BELOW THIS	nformation or LINE	2) Personal Interview	

RESPONSE	DATE RECEIVED:
TORUS CALL SECTION TO THE CONTRACT OF THE CONT	. And Carlos — Let (1. ¥1.2. 11.2.2. — 1. 11.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
A TO BENEFIT AND DESCRIPTION OF TRANSPORT OF THE PROPERTY OF T	NO DEMINAL OFFICE SECRETING A COMPLETIVE ON E 03 - 6 - 27662 WHICH WAS RECEIVED ON
he following pertains to informal grievances only: sed on the above information, your grievance is u have the right to submit a formal grievance in accordance w	. (Returned, Denied, or Approved). If your informal grievance is deni
fficial (Signature): R Castle	Date: 9.22.2003

Distribution:

White -Returned to Inmate Canary -Returned to Inmate

Pink -Retained by official responding, or if the response is to an informal grievance then forward to be placed in inmate's file.